



UNIVERSITY OF MADRAS
INSTITUTE OF DISTANCE EDUCATION
POSTGRADUATE COURSES - 2018-2019/2019
 APPLICATION FOR ADMISSION
ENROLMENT NUMBER (to be assigned by the IDE office)

APPLICATION COST : Rs.100/-
 APPLICATION NUMBER

DOWNLOADED

ACADEMIC YEAR 2018-2019 **A** **1** **8**

CALENDAR YEAR 2019 **C** **1** **9**

CANDIDATE TO FURNISH ALL THE REQUIRED PARTICULARS BELOW IN CAPITAL LETTERS

Candidate to tick (✓) any one of the appropriate boxes for Tuition Fee Concession (Certificate to be enclosed)	Differently Abled <input type="checkbox"/> Prisoner <input type="checkbox"/>
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Name of the Course	Main Subject	Medium (Tick ✓)
<input type="text"/>	<input type="text"/>	TAMIL <input type="checkbox"/> ENGLISH <input type="checkbox"/>

PERSONAL CONTACT PROGRAMME CENTRE					
Centre Code	1	0	1	Place	CHENNAI

ADDRESS FOR COMMUNICATION (WRITE IN CAPITAL LETTERS)

NAME : _____

Father's Name : _____

Door No. & Street : _____

Town / Village Post : _____

District : _____

State : _____ INDIA

Pin code : _____

Father's Mobile No : _____

Registered Mobile No. : _____ e-mail _____

Passport size
Photo
to be
affixed

1. NAME OF THE APPLICANT (as given in the certificate in CAPITAL LETTERS)	(a) in English :		_____	
	(b) in Tamil:		_____	
2. Father's Name (a) Expansion of Initial	_____			
3. (a) Date of Birth as per Christian era	(b) Age	(c) Gender (Tick ✓)	Men <input type="checkbox"/> Women <input type="checkbox"/> Transgender <input type="checkbox"/>	d) Aadhaar No :
4. Nationality			5. Religion	
6. a) Community (Tick ✓)	b) Caste		7. Mother Tongue	
OC <input type="checkbox"/> / BC <input type="checkbox"/> / MBC <input type="checkbox"/> / SC <input type="checkbox"/> / ST <input type="checkbox"/>				
8. Present Occupation, if employed :	_____			

9. Are you undergoing any other course in a College or University? If so, Specify

10. The wards of Defence Personnel / Ex-Servicemen should specify as :
 (a) Ward of Defence Service Personnel
 (b) Ward of Ex-Servicemen : Navy / Army / Air force.

11. DETAILS OF EXAMINATION PASSED

Examinations passed with Subjects	Name of the		Month & Year of Passing	Registration Number	Class with Grade / Marks	Maximum Marks
	School / College	Board / University				
S.S.L.C. / 10th Std. Strikeout whichever is not applicable (State Whether it is One Year or Two Years Course)						
P.U.C. / Higher Secondary Strikeout whichever is not applicable (State Whether it is One Year or Two Years Course)						
Diploma Course Strikeout whichever is not applicable (State Whether it is Two Years or Three Years Course)						
Name of the Degree passed						

12. Enclosures

- (1) (3) (5)
 (2) (4) (6)

I hereby declare that all the particulars given above are correct and I agree to abide by all the Rules and Regulations of the University that are in force from time to time.

Station :

Date :

SIGNATURE OF THE APPLICANT

FOR OFFICE USE ONLY

The Admission particulars furnished in the column No. 12 have been duly verified with Originals and the Candidate is eligible for admission

VERIFYING STAFF

1. Admission / Cancellation Intimation sent on

2. Certificates returned to the Candidate on

- (1) S.S.L.C Statement of Marks (2) HSC Statement of Marks
 (3) UG Statement of Marks / Provisional/ Degree (4) Transfer Certificate

ASST. /ASST. SECTION OFFICER

SECTION OFFICER

ASSISTANT REGISTRAR

DIRECTOR

Received the Provisional admission intimation and all the original certificates submitted by me

SIGNATURE OF THE APPLICANT WITH DATE

11. Nationality	INDIAN	12. Region	Urban <input type="checkbox"/>	Rural <input type="checkbox"/>																				
13. Religion	<table border="1" style="width:100%; height:45px;"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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14. Caste	<table border="1" style="width:100%; height:55px;"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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15. Community SC <input type="checkbox"/> ST <input type="checkbox"/> MBC <input type="checkbox"/> BC <input type="checkbox"/> OC <input type="checkbox"/>																								
16. Differently abled Candidates		YES <input type="checkbox"/> NO <input type="checkbox"/>																						
17. Are you employed ?		YES <input type="checkbox"/> NO <input type="checkbox"/>																						
18. Are you a ward of a Defence Service Personnel ? (Army / Navy / Air Force)		YES <input type="checkbox"/> Category :																						
		NO <input type="checkbox"/>																						
19. Are you a ward of an Ex-service person ?		YES <input type="checkbox"/> NO <input type="checkbox"/>																						
20. Tuition Fee Concession Opted ? (Candidate to tick (✓) any one of the appropriate boxes for avail any one of the Concession)		Differently Abled <input type="checkbox"/> Prisoner <input type="checkbox"/>																						
<div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto; padding: 10px;"> <p style="text-align: center;">Affix Passport Size Photo</p> <p style="text-align: center;"><i>Not to be attested</i></p> </div> <p style="text-align: right; margin-top: 20px;">Signature of the Candidate</p> <p>Station :</p> <p>Date :</p>																								